

Received in the U.S. Patent and Trademark Office, kindly
date-stamp and return this card

Date: December 29, 2000

Serial No.: 09/325,122

Client: Casa Herrera, Inc.

For: METHOD FOR HANDLING MASA

Atty. Dkt. No.: CAS1PAU24R2

Enclosed:

1. Transmittal letter;
2. Reissue Patent Application;
3. Reissue Application Fee Transmittal Form +1cc;
4. Specification and claims (35 pages);
5. Four (4) sheets of drawings;
6. A copy from the parent application of the Power of Attorney
7. A copy from the parent application of the Declaration as to Loss of Letters patent;
8. A copy from the parent application of a Statement Under 37 CFR 3.73(b) with copies of the assignment documents showing chain of title;
9. A copy from the parent application of a Consent Of Assignee;
10. Certificate of Express Mail #EL608384342US;
11. A copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Anguiano);
12. A copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Sanchez);
13. A copy from the parent application of a Reissue Application Declaration By The Inventor (unsigned by Ceja, but accompanied by Decision According Status Under 37 CFR 1.47(a);
14. Check No. 3112 in the amount of \$355; and
15. A return postcard.

Received in the U.S. Patent and Trademark Office, kindly
date-stamp and return this card

Date: December 29, 2000

Serial No.: 09/325,122

Client: Casa Herrera, Inc.

For: METHOD FOR HANDLING MASA

Atty. Dkt. No.: CAS1PAU24R2

3C715 U.S. PTO
09/753171

Enclosed:

1. Transmittal letter;
2. Reissue Patent Application;
3. Reissue Application Fee Transmittal Form +1cc;
4. Specification and claims (35 pages);
5. Four (4) sheets of drawings;
6. A copy from the parent application of the Power of Attorney
7. A copy from the parent application of the Declaration as to Loss of Letters patent;
8. A copy from the parent application of a Statement Under 37 CFR 3.73(b) with copies of the assignment documents showing chain of title;
9. A copy from the parent application of a Consent Of Assignee;
10. Certificate of Express Mail #EL608384342US;
11. A copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Anguiano);
12. A copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Sanchez);
13. A copy from the parent application of a Reissue Application Declaration By The Inventor (unsigned by Ceja, but accompanied by Decision According Status Under 37 CFR 1.47(a);
14. Check No. 3112 in the amount of \$355; and
15. A return postcard.

MYERS, DAWES & ANDRAS LLP
Patents, Trademarks, and Copyrights

December 29, 2000

BOX REISSUE

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

Transmitted herewith for filing in the United States Patent and Trademark Office is the patent application of:

Inventor(s): Victor R. Sanchez et al.
Assignee: Casa Herrera, Inc., a California corporation
Docket No.: CAS1PAU24R2
For: METHODS FOR HANDLING MASA

Enclosed are a Reissue Patent Application Transmittal, a Reissue Application Fee Transmittal Form +1cc; a Preliminary Amendment; specification and claims (35 pages); four (4) sheets of drawings; a copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Anguiano); a copy from the parent application of a Reissue Application Declaration By The Inventor (signed by Sanchez); a copy from the parent application of a Reissue Application Declaration By The Inventor (unsigned by Ceja, but accompanied by Decision According Status Under 37 CFR 1.47(a); a copy from the parent application of the Power of Attorney; a copy from the parent application of the Declaration as to Loss of Letters Patent; a copy from the parent application of a Statement Under 37 CFR 3.73(b) with copies of the assignment documents showing chain of title; a copy from the parent application of a Consent Of Assignee; a Certificate of Express Mailing; a return postcard; and this transmittal letter.

Respectfully submitted,


Joseph C. Andras
Registration No. 33,469

JCA/aw

Enclosures

Express Mail Label Number: EL608384342US

Date of Deposit: December 29, 2000

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231

Angela Williams


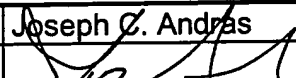

(Signature of person mailing paper or fee)

Please type a plus sign (+) inside this box → ☒

PTO/SB/50 (08-00)
Approved for use through 12/30/2000. OMB 0651-0033
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231		Attorney Docket No. CAS1PAU24R2	
		First Named Inventor Victor R. Sanchez	
		Original Patent Number 5,635,235	
		Original Patent Issue Date (Month/Day/Year) 06/03/97	
		Express Mail Label No. EL608384342US	
APPLICATION FOR REISSUE OF: (Check applicable box)		<input checked="" type="checkbox"/> Utility Patent <input type="checkbox"/> Design Patent <input type="checkbox"/> Plant Patent	
APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/ SB/ 56) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. <input checked="" type="checkbox"/> Original U.S. Patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant	
3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate)		<input checked="" type="checkbox"/> Statement of Loss (PTO/SB/55) *	
4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)		9. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable)	
5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) * (37 C.F.R. § 1.175) (PTO/SB/51 or 52)		10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
6. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check applicable box(es))		11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable);	
<input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) *		12. <input checked="" type="checkbox"/> Preliminary Amendment	
<input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney *		13. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
(PTO/SB/96)		14. Other:	
* = copy from parent			
15. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number or Bar Code Label  or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)			
Name MYERS, DAWES & ANDRAS LLP			
Address 19900 MacArthur Blvd., Suite 1150			
City	State	Zip Code	
Irvine	CA	92612	
Country	Telephone	Fax	
US	(714) 444-1199	(714) 444-1198	
NAME (Print/Type) Joseph C. Andras		Registration No. (Attorney/Agent) 33,469	
Signature 		Date 12-29-2000	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) CAS1PAU24R2		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 20	Total Claims (37 CFR 1.16(j))	(B) 20	**** 0 =	x \$ 18 =	0	or	x \$ ____ =	
(C) 3	Independent claims (37 CFR 1.16(i))	(D) 3	• 0 =	x \$ 80 =	0		x \$ ____ =	
Basic Fee (37 CFR 1.16(h))					\$ 355		\$ ____	
Total Filing Fee					\$ 355	OR	\$	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(i))	***	MINUS	**	=	x \$ ____ =		x \$ ____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ ____ =		x \$ ____ =	
Total Additional Fee					\$	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>01-1960</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>355</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> <p><u>12-29-2000</u> Date</p> </div> <div style="width: 60%; text-align: center;">  Signature of Applicant, Attorney or Agent of Record <u>Joseph C. Andras, Reg. No. 33,469</u> Typed or printed name </div> </div>								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MYERS, DAWES & ANDRAS LLP
650 TOWN CENTER DR. FL 6 (714) 44-1199
COSTA MESA, CA 92626

CALIFORNIA FEDERAL BANK
COSTA MESA, CA 92626
90-7177/3222 721

3112

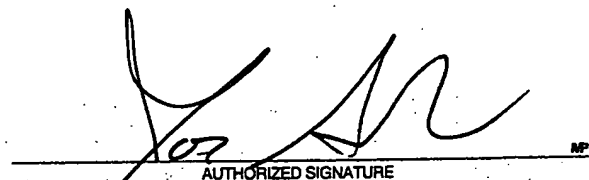
Dec. 29, 2000

PAY TO THE ORDER OF Assistant Commissioner for Patents

\$355.00

Three Hundred Fifty-Five and 00/100***** DOLLARS

MEMO Reissue Application Fee
CAS1PAU24R2
JCA/aw


AUTHORIZED SIGNATURE

⑈003112⑈ ⑆322271779⑆ ⑈7214092946⑈

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

TLS

MYERS, DAWES & ANDRAS LLP

3112

Reissue Application Fee - \$355.00
CAS1PAU24R2
JCA/aw

MYERS, DAWES & ANDRAS LLP

3112